

MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET  
(FOR USE WITH FORM PTO-875)

Serial No.

Priority Date

10/581536

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1			1							51			
2										52			
3										53			
4										54			
5										55			
6										56			
7										57			
8										58			
9			1							59			
10			1							60			
11										61			
12										62			
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42										92			
43										93			
44										94			
45										95			
46										96			
47										97			
48										98			
49										99			
50										100			
TOTAL IND.			2										
TOTAL DEP.			10										
TOTAL CLAIMS			12										